

RECEIVED  
CENTRAL FAX CENTER

MAR 23 2005

In the United States Patent and Trademark Office

Serial No. 10/043,423	\$	Filing Date: 01/10/2002
5 Title: DRIVE SHAFT COUPLING		\$
		\$
		\$
		Examiner: Bindu, Gregory
10 Applicant: WHITE, Patrick M.	\$	GA No.: 3679
Atty docket no: 1.PS66.25		\$

15 CERTIFICATE OF TRANSMISSION UNDER 37 CFR §1.8. I hereby certify that this correspondence is being facsimile transmitted to the Patent and Trademark Office

On March 23, 2005

20 Typed or printed name of person signing this certificate: J. Moetteli  
Signature of person signing this certificate: [Signature]

25 **SECOND AFTER FINAL AMENDMENT AND REQUEST FOR RECONSIDERATION AND A FORM PTOL-413A INTERVIEW**

30 *Via facsimile to 001-703-872-9306, to:*  
Assistant Commissioner for Patents  
2011 South Clark Place  
Crystal Plaza Two, Lobby Room 1B03  
Arlington, Virginia 22202  
U.S.A.

35 Dear Sir:

40 Applicant again thanks the Examiner for his Advisory Action dated February 10, 2005, responsive to our communication dated 31 January 2005 (in response to your final action of December 8<sup>th</sup>, 2004) and for his kind attention during an informal telecon. In response thereto, Applicant requests that the following amendments be entered:

03/29/2005 SGARNETT 00000004 500800 10043423

03/29/

10/04/2023

Application or Docket Number

1-P566-25

PATENT APPLICATION FEE DETERMINATION RECORD  
Effective October 1, 2001

## CLAIMS AS FILED - PART I

(Column 1) (Column 2)

TOTAL CLAIMS	62	
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	(62 minus 20 = )	( <del>62</del> 42)
INDEPENDENT CLAIMS	(6 minus 3 = )	( <del>6</del> 3)
MULTIPLE DEPENDENT CLAIM PRESENT		<input type="checkbox"/>

\* If the difference in column 1 is less than zero, enter "0" in column 2

SMALL ENTITY  
TYPE  OR OTHER THAN  
SMALL ENTITY

RATE	FEES	RATE	FEES
BASIC FEE	370.00	BASIC FEE	740.00
XS 9=	370	XS18=	
X42=	126	X84=	
+140=		+280=	
TOTAL	874	OR TOTAL	

## CLAIMS AS AMENDED - PART II

(Column 1) (Column 2) (Column 3)

AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	• 62	Minus	= 62 = 1
Independent	• 6	Minus	= 6 = 1
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			<input type="checkbox"/>

SMALL ENTITY OR OTHER THAN  
SMALL ENTITY

RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
XS 9=	10	XS18=	
X42=	10	X84=	
+140=		+280=	
TOTAL ADDIT. FEE	10	OR TOTAL ADDIT. FEE	

## BEST AVAILABLE COPY

1-31-05 (Column 1)

(Column 2) (Column 3)

AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	• 62	Minus	= 62 = 1
Independent	• 6	Minus	= 6 = 1
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			<input checked="" type="checkbox"/>

RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
XS 9=		XS18=	
X42=		X84=	
+140=		+280=	
TOTAL ADDIT. FEE		OR TOTAL ADDIT. FEE	

3-23-05

(Column 1)

(Column 2) (Column 3)

AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	• 62	Minus	= 62 = 1
Independent	• 6	Minus	= 6 = 1
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			<input type="checkbox"/>

RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
XS 9=		XS18=	
X42=		X84=	
+140=		+280=	
TOTAL ADDIT. FEE		OR TOTAL ADDIT. FEE	

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.